



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/668,459	09/25/2000	SHUJI OZAWA	862.C2005	2103
5514	7590	09/27/2005	EXAMINER	
FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112			THOMPSON, JAMES A	
			ART UNIT	PAPER NUMBER
			2624	
DATE MAILED: 09/27/2005				

Please find below and/or attached an Office communication concerning this application or proceeding.



Serial No. : 09668459
Applicant : SHUJI OZAWA
Filing Date : September 25, 2000
Date Mailed : September 27, 2005

ACKNOWLEDGEMENT OF REQUEST

Notice of Allowance/Allowability Mailed

The request for a corrected notice of allowance/allowability, dated August 5, 2005, has been received by the U.S. Patent and Trademark Office. A corrected notice of allowance/allowability will not be mailed, but the Office has verified the following information, and made any necessary corrections to Office computer data:

- The error in the title has been corrected as shown on the attached Bibliographic Data Sheet.

Natarsha Horne
For the Office of Patent Publication



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 2103

Bib Data Sheet

SERIAL NUMBER 09/668,459	FILING OR 371(c) DATE 09/25/2000 RULE	CLASS 358	GROUP ART UNIT 2624	ATTORNEY DOCKET NO. 862.C2005
APPLICANTS SHUJI OZAWA, TOKYO, JAPAN;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** JAPAN 11-272950 09/27/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/27/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 9	TOTAL CLAIMS 9
				INDEPENDENT CLAIMS 3
ADDRESS 5514				
TITLE IMAGE PROCESSING APPARATUS AND METHOD				
FILING FEE RECEIVED 948	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	